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CONFIRMATION NO. 7946

|  |   |                               |  |                                       |                                  |
|--|---|-------------------------------|--|---------------------------------------|----------------------------------|
| SERIAL NUMBER<br>10/098,605  | FILING DATE<br>03/14/2002<br><br>RULE   | CLASS<br>482                  | GROUP ART UNIT<br>3764   | ATTORNEY<br>DOCKET NO.<br>P08-12-0008 |                                  |
| APPLICANTS<br><br>Kim Parmater, Minnetonka, MN;<br><br>** CONTINUING DATA ***** <i>none LA</i><br><br>** FOREIGN APPLICATIONS ***** <i>none PA</i><br><br>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **<br>** 04/18/2002  |   |                               |  |                                       |                                  |
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged<br><i>J. Larson</i> <i>PA</i><br>Examiner's Signature Initials |   | STATE OR<br><br>COUNTRY<br>MN | SHEETS<br><br>DRAWING<br>5   | TOTAL<br><br>CLAIMS<br>20 6           | INDEPENDENT<br><br>CLAIMS<br>2 1 |
| ADDRESS<br>27367<br>WESTMAN CHAMPLIN & KELLY, P.A.<br>SUITE 1600 - INTERNATIONAL CENTRE<br>900 SECOND AVENUE SOUTH<br>MINNEAPOLIS , MN<br>55402-3319   |   |                               |  |                                       |                                  |
| TITLE<br>Multifunction exercise device   |   |                               |  |                                       |                                  |
| FILING FEE<br><br>RECEIVED<br>370  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |                                       |                                  |